

No 64.
Div. 2.

#15

No 4 Sanson

A Thesis By

Hobson C Whitelaw

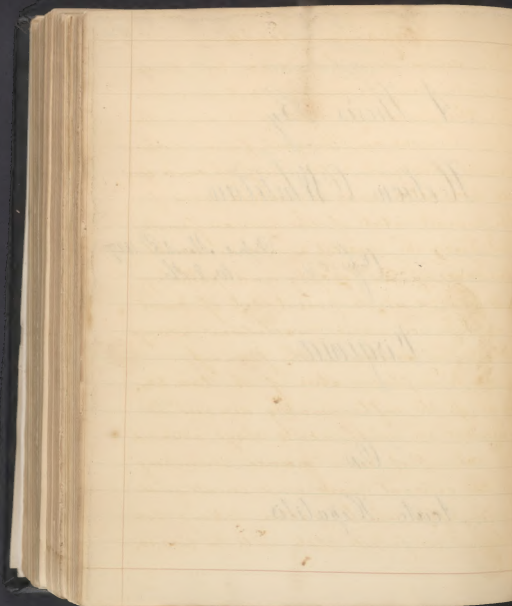
Of

Passed March 8th 1827
W. S. H.

Virginia

On

Acute Hepatitis



Hepatitis. Acuta.

1

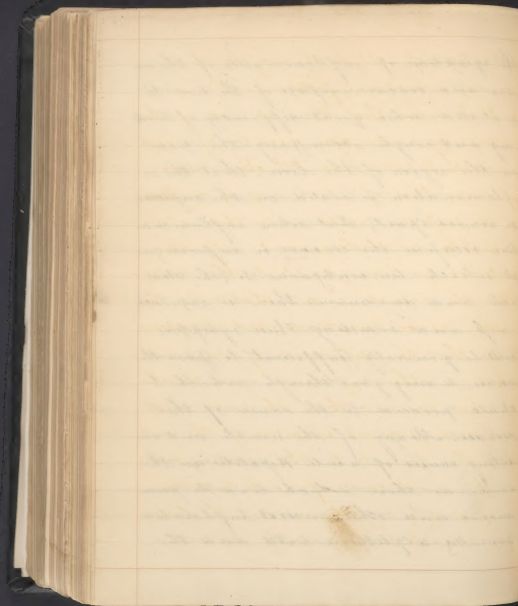
This disease has long since been divided into two forms: viz. acute and chronic, the former of which it is my intention to treat on. The acute form of this disease, from its rapid progress and speedy termination may be considered as one of the frequent outlets of the human family; but since the medical world under the guidance of philosophy and pathology has arrived at its present state of knowledge, the scientific practitioner always meets this disease with firmness.

Acute inflammation of the liver like most of the inflammatory diseases is ushered in with a cold stage, attended by paleness of countenance shrinking of the external parts and small quick pulse; after which reaction taking place the hot or febrile state will be induced;

[The page contains extremely faint, illegible handwriting, likely bleed-through from the reverse side. The text is organized into several paragraphs across the lined paper.]

attended by, increased heat, considerable pyrexia, a frequent, strong, and hard pulse, high coloured urine, with a pungent pain, in the right hypochondrium, sometimes extending to the shoulder: the disease advancing, there will be inability to lie with ease, except on the side affected, dry cough and frequently much gastric irritability; the intestines are generally inactive and the stools evince a deficiency of biliary secretion or at least of any intermixture of it with them; there is loss of appetite great thirst with a hot dry skin, and the tongue covered with a white, and sometimes with a yellowish fur, when the disease has continued for some time the skin and eyes become tinged of a deep yellow colour. Almost all writers on the subject make a distinction between

the symptoms of inflammation of the convex and concave surface of the liver. It is stated, when great difficulty of breathing and cough accompany the pain in the region of the liver, that the inflammation is seated in the superior or convex part, but when inflammation occupies the concave or inferior part which lies contiguous to the stomach and duodenum there is more sickness and vomiting. These symptoms will be generally sufficient to know the disease, having gone through which I shall proceed to the causes of this disease. Many of the remote and exciting causes of acute Hepatitis are the same as those which lead to pneumonia and other visceral inflammations. Viz. a plethoric habit and the



application of cold to the surface of the body when heated or fatigued. It is said by Dr. Solencon that there are some of the predisposing causes more peculiarly connected with hepatic than with other visceral inflammations, of which may be mentioned the male sex, particularly those of irritable dispositions, but why the male sex are more liable to this disease than the female is not stated by the author above mentioned; but it appears to me that the difference of sex would have no other influence over attacks of this disease, than the more constant and frequent exposure of the male than the female to the exciting causes.

The remote causes of acute Hepatitis are frequently very obscure; but the following seem to be frequently evident.

External violence from contusions or falls
 and especially those which have occasioned
 a fracture of the cranium, certain prop-
 erties of the mind, violent summer heats,
 undue exercise, exposure to marsh mis-
 ma & lastly various solid concretions
 in the substance of the liver produced
 from unknown causes. Ardent spirits in
 temperately used has always been ranked
 foremost among the exciting cause
 this disease, but says Dr Johnson, I am
 convinced that the acute species of Hepat-
 itis inflammation now under considera-
 tion is seldom induced in this way.
 It is also stated by Johnson as well as
 Thomas that in five cases out of six
 the exciting cause of Hepatitis will be
 found to be, partial application of
 cold or wet when the body is heated or

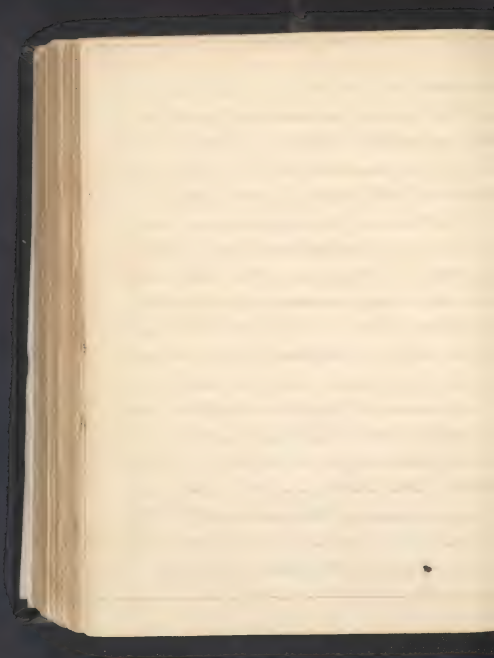


not fatigued by violent exercise. in whose
 opinions I am very much disposed to con-
 cur. Of the pathology of this disease
 I cannot say much. Dr. Cullen in speak-
 ing of the pathology of this disease makes
 the following observations, It seems prob-
 able says he that acute hepatitis is
 always an affection of the external mem-
 brane of the liver and that the chro-
 nic form is an affection of the paren-
 chyma; but it seems to me that
 there could not exist inflammation of
 the membrane of the liver without
 the parenchyma being more or less
 affected and vice versa.

Of the Diagnosis. The diseases with
 which Hepatitis is most likely to be
 confounded are, pneumonia, gastritis
 and a spasmodic affection of the

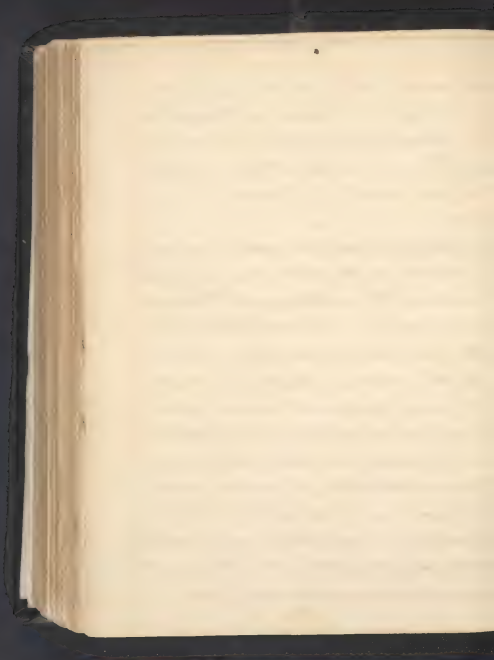


gall ducts. we shall be able to distinguish it from Pneumonia^d by the pain extending to the shoulder in Hepatitis whereas in Pneumonia it is more confined to the chest, by the sallowness of countenance, the cough being untended by expectoration and by the less degree of dyspnoea. The heat and pain not being increased from taking any thing into the stomach, its being able to return whatever liquors or medicines are received into it, without the immediate rejection of them and the less prostration of strength, will be sufficient to distinguish it from gastritis. Hepatitis may be distinguished from spasm of the gall ducts, ^{1st} by the absence of nausea, ^{2^d} by the pain being permanent ^{3^d} by the pulse being very



frequent used by the patient always preferring to keep the body in a straight position, whereas the patient will blame the greatest ease, when there is spasm of the gall ducts, by bending the body forward.

Of the prognosis. The most favourable symptoms in Hepatitis, are, a gradual abatement of the febrile symptoms, an improvement in the complexion, the strength not much reduced, return of appetite &c. whereas, intensity of pain, a full and frequent pulse, great heat, dry skin, costiveness, thirst, and frequent rigours, denote approaching or existing suppuration. Hepatitis like most visceral inflammations may terminate, in resolution, suppuration, abscess or gangrene. Its most frequent



termination, at least in this state, is
 by resolution, which is frequently attend-
 ed, by discharges or evacuations of differ-
 ent kinds, supposed by many writers to
 be critical, such as hemorrhages from
 the nose or hemorrhoidal vessels, sweat-
 ing, diarrhoea, depositions of sediment
 in the urine and sometimes a serous
 effusion in the cavity of the abdomen
 shewing itself under the form of
 ascites. The most frequent of the un-
 favourable terminations of Hepatitis
 is in suppuration, the symptoms
 of a tendency to which, I have stated
 above, but when suppuration has already
 taken place, the fever becomes some-
 what intermittent, frequent rigours
 or shiverings are felt, the sense of weight
 in the part increases, the pain is less

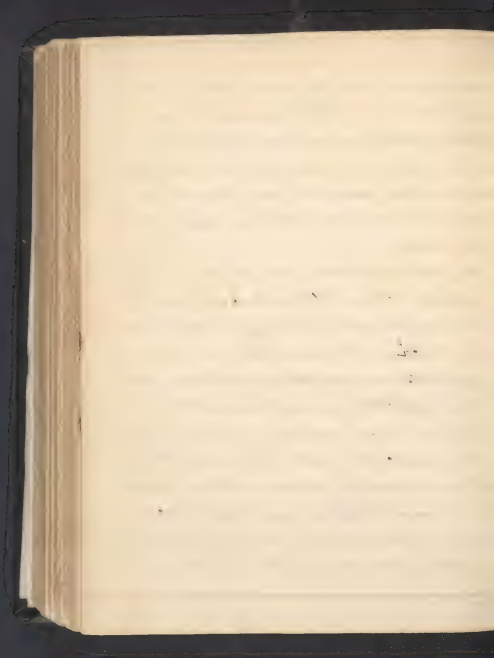


white but if the throbbing kind the tongue is
 white with a flushing of countenance &c. The
 abscess may form on various parts of the liver
 is seated on the convex surface of the liver
 or, there may be adhesions either to the
 peritoneum or to the diaphragm; if adhe-
 sions take place to the peritoneum the pus
 is generally discharged cutaneously, if to the
 diaphragm it most frequently makes
 its way into the thorax producing al-
 most certain death, although there have
 been instances of recovery after this event, one of
 which is mentioned by Dr. Johnson in his
 work on the liver; if the abscess be seated
 on the concave surface of the liver, adhesions
 generally take place to the intestines, either
 the colon or duodenum and the pus
 passing in this way is discharged by
 stool or vomiting, sometimes also the matter



is discharged into the intestines by the
 large ducts of the other terminations of
 Hydatids I shall not say any thing as the
 one is as rare as hardly to be met with
 and the other may be more properly re-
 ferred to the head of chronic derangements
 of the Liver.

Dissections of those who have died of
 this disease show the Liver, frequently
 to be very much enlarged and hard
 to the touch; its colour also is very
 much altered and the membranes even
 a lips affected by inflammation. Dis-
 sections also show adhesions of this organ
 to the adjacent parts, that tubercles as
 well as Hydatids are sometimes found
 in it and that large abscesses con-
 taining a considerable quantity of matter
 are often found in its substance.



Gallary calculi are now and then found, and it is stated by authors that the liver is sometimes found in a putrid state, resembling very much in appearance a honeycomb, but it appears that tubercles are amongst the most frequent appearances on dissection, the various kinds of which enumerated by Brown, Bailey and others, I shall not enter into a detail of.

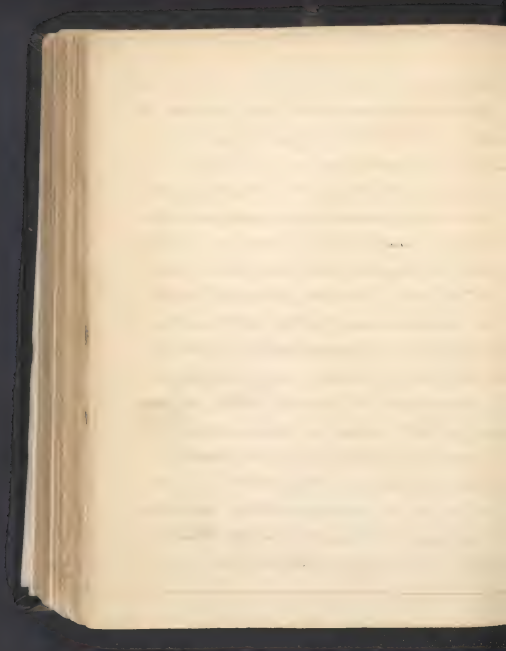
Of the treatment, the treatment of acute hepatitis should vary as commenced by various bleeding both topical and general, purging being low diet and very antispasmodic mean should be strictly enforced. In the beginning of our treatment we should always early resection far enough to relieve the



pain or at least to enable the patient
 to bear pressure on the chest
 with some degree of ease. As it respects
 local bloodletting, cupping should be
 preferred to leeching, as by this
 means we can command a larger
 quantity of blood; after this general
 and local bloodletting, we should
 apply a large blister over the region
 of the liver; during the administra-
 tion of these remedies we should
 also resort to purging. Concerning
 the choice of Purgatives there has
 been some discrepancy of opinion
 some Practitioners advising the
 saline and vegetable purgatives and
 others the mercurial, but a combi-
 nation of both kinds, seems to me
 to be preferable. Dr. Johnson in



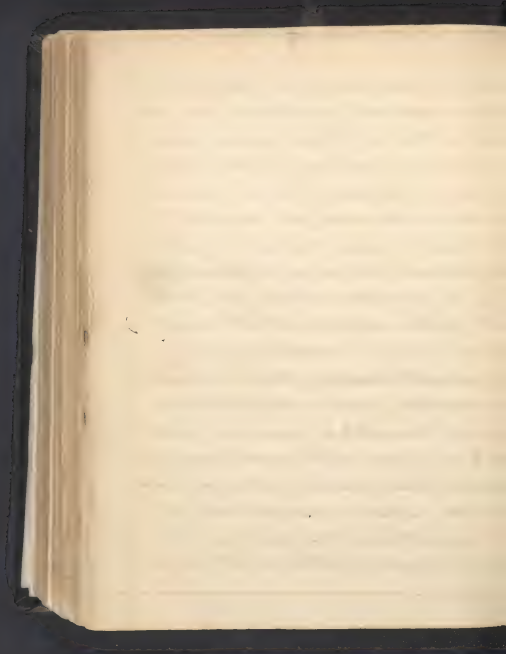
speaking of the choice of purgatives makes
the following observation, "No however the
modern scholastic Physiologist or
routine Physician may laugh at
the idea, of cathartics hydragogues
&c. he who personally examines the
effects of purgative medicines on the
fecal discharges, will entertain no
doubt of the power which partic-
ular medicines possess of causing
evacuations of particular fluids. He
therefore (and I think very justly) pre-
fers calomel to most other Purga-
tives; for the liver in this disease be-
ing gorged with blood, unless
we can remove this state of an-
gegment by venesection and sui-
table purgatives, it must termi-
nate in suppuration. And it is



well known that none of neutral
salts or indeed any common purgative
have any or very little effect in causing
either a discharge of blood from
an engorged liver or to relieve the
biliary ducts of their contents, where-
as calomel independent of its pur-
gative properties has such an effect
to a very great degree; therefore I think
the mercurial purgatives should al-
ways be preferred, although their
action may be very much assisted
by any of the neutral salts or senna.
Thus, after having given a dose of
calomel we should follow it with
a dose of either the epsom or glauber
salt and senna, which should
be repeated from time to time
pro re nata. The stomach and



bowels are sometimes very irritable; to relieve which we should give calomel in two or three grain doses continued with a fourth of a grain of opium, if these means succeed in calming the irritability of the stomach and producing gentle diarrhoea, we may suppose every thing in a favourable condition, but if the surface of the body should remain constricted and notwithstanding these remedies, we should administer (if the stomach will bear it) a grain of pulvis Antimonialis with each dose of calomel; these remedies should be continued untill a brassy taste of the mouth is observed or a mercurial tinct of the breath or a

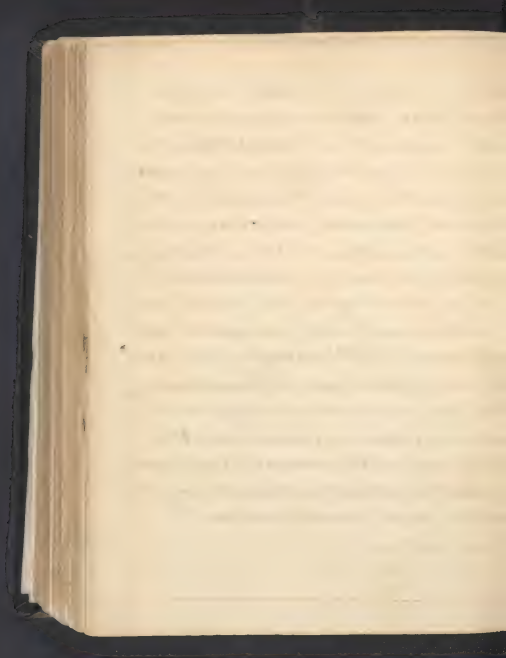


acute Hepatitis, by its termination in suppuration; the other terminations of this disease I shall say any thing of, as the one is not to be cured by any remedy and the other may be more properly referred to the chronic form of this disease.

When Hepatitis has not been treated by suitable remedies or has not been attended to in time, it almost always terminates in suppuration, which if we find unavoidable from our not having seen the patient in time, we should endeavour to promote, to effect which we should give Peruvian bark in osacorn doses every two or three hours during the day, using at the same time a nutritive diet



with a moderate quantity of wine
 which course should be continued
 until suppuration is completed, after
 this we should apply a large em-
 -ment poultice over the region of the
 liver, to produce a discharge of
 matter externally; which should be
 effected as soon as fluctuation
 and a pointing of the abscess can
 be discovered, by an open made exter-
 -nally down to the abscess; if this can
 not be effected and it ^{shewily} break inter-
 -nally all we can do is to support the
 system by tonics a generous diet &c.
 of the diet in this disease, it should
 be strictly antiphlogistic; allowing the
 patient sago Tapioca rice &c.



spongy redness of the gums; after which the medicine should be discontinued or at least given very seldom so as to prevent opthalmia which I think is not necessary in the treatment of acute Hepatitis, although an alterative course in my opinion is almost always necessary. In admitting that inflammation of the liver may be subdued by anti-phlogistic means, which certainly is the case, yet there always remains more or less functional derangement of this organ which nothing can so completely eradicate as an alterative course of mercury. There are some practitioners and particularly those of the tropical climates who advise the

use of mercury in the commencement of the disease in such a manner as to produce its specific effects on the system; but this practice will (I think) always prove pernicious, for admitting that such an effect could take place when the system is under considerable excitement from inflammation (which I think is very doubtful) it would only be adding oil to fire, and increasing the already irritable state of the system; therefore I think mercury should never be used in this way, to cure acute Hepatitis.

I thus have I noticed most of the remedies employed in this disease and I have only now to notice the treatment of one of the terminations of

